



03/17/05 14:53 FAX 703 308 5065

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PART B - FEE(S) TRANSMITTAL

Complete and send this form, together with applicable fee(s), to: Mail Stop ISSUE FEE
Commissioner for Patents
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Fax (703)746-4000

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Peter A Borsari
Suite 206
2001 Jefferson Davis Hwy
Arlington VA 22202-3603

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I hereby certify that this Fee(s) Transmittal is being deposited with the United States Postal Service with sufficient postage for first class mail in an envelope addressed to the Box below. Fee address above, or being facsimile transmitted to the USPTO, on the date indicated below.

VANESSA BROWN	(Depositor's name)
Vanessa Brown	(Signature)
3-17-05	(Date)

APPLICATION NO.	FILING DATE	FIRST NAMED INVENTOR	ATTORNEY DOCKET NO.	CONFIRMATION NO.
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10/16/04 415 10/15/03 Darius Klauskas 74-2860 4404

TITLE OF INVENTION: Natural Shape Enhancing Brassiere

APPLN. TYPE: Nonprovisional

SMALL ENTITY: YES

ISSUE FEE

PUBLICATION FEE

TOTAL FEE(S) DUE

DATE DUE

\$700

\$300

\$1000

3/17/05

EXAMINER: Hale, Gloria M

ART UNIT: 3765

CLASS-SUBCLASS:

- Change of correspondence address or indication of "Fee Address" (37 CFR 1.363).
 Change of correspondence address (or Change of Correspondence Address form PTO/SB/12) attached.
 "Fee Address" indication (or "Fee Address" indication form PTO/SB/47; Rev 03-02 or more recent) attached. Use of a Customer Number is required.

2. For printing on the patent front page, list (1) the names of up to 3 registered patent attorneys or agents OR, alternatively, (2) the name of a single firm (serving as a member of a registered attorney or agent) and the names of up to 2 registered patent attorneys or agents. If no name is listed, no name will be printed.

Peter A. Borsari

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3

3. ASSIGNEE NAME AND RESIDENCE DATA TO BE PRINTED ON THE PATENT (print or type)

PLEASE NOTE: Unless an assignee is identified below, no assignee data will appear on the patent. Inclusion of assignee data is only appropriate when an assignment has been previously submitted to the USPTO or is being submitted under separate cover. Completion of this form is NOT a substitute for filing an assignment.

(A) NAME OF ASSIGNEE

(B) RESIDENCE: (CITY and STATE OR COUNTRY)

Please check the appropriate assignee category or categories (will not be printed on the patent)

individual corporation or other private group entity government

4a. The following fee(s) are enclosed:

4b. Payment of Fee(s):

Issue Fee

A check in the amount of the fee(s) is enclosed.

Publication Fee

Payment by credit card. Form PTO-2038 is attached.

Advance Order - # of Copies _____

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3/17/05

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DATE: March 17, 2005

TO:	Name	Fax No.	Phone No.
Commissioner for Patents		703-746-4000	703-305-8283

FROM: Vanessa V. Brown for Thomas A. Brackey II, Esq.

NUMBER OF PAGES INCLUDING THIS COVER SHEET: 3

CASE NAME: Sheer Shapes Patent Application No. 10/684,415

RE: Part B – Fee(s) Transmittal and Credit Card Payment Form

ORIGINAL/COPY WILL BE MAILED ORIGINAL/COPY WILL NOT BE MAILED

MESSAGE:

Please find attached the above-referenced documents. Please contact this office, if you have any questions or concerns with these documents as the current patent attorney, Peter Borsari, is on vacation until March 20th, 2005.

Thank you.

Vanessa V. Brown
Legal Assistant to T. Brackey II, Esq.

If problems occur, please call our facsimile operator at (310) 247-2165.